

PAM.
MED. MISS.

The Healing Art in Arabia



BY THE BANKS OF THE EUPHRATES.

Board of Foreign Missions of the Reformed Church in America,
25 East 22d Street, New York.



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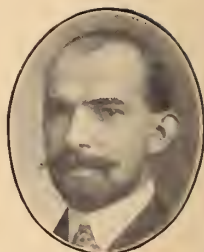
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Medical Missions
of the
Reformed Church in America

Arabia



A DOCTOR ON TOUR ACROSS THE DESERT.

By
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INTRODUCTORY NOTE.

THIS BRIEF ACCOUNT OF THE MEDICAL WORK OF THE ARABIAN MISSION, ITS BEGINNINGS AND PROGRESS, AND ITS HOPES FOR THE FUTURE, IS WRITTEN WITH THOSE IN MIND ESPECIALLY WHO HAVE FOLLOWED IT WITH THEIR INTEREST, THEIR PRAYERS AND THEIR GIFTS. IT IS BUT A MEAGER OUTLINE, AND BUT FAINTLY SUGGESTS THE INTERESTING DETAILS OF THE WORK. BUT IT IS HOPED THAT IT DOES MAKE CLEAR THE VALUE AND IMPORTANCE AND SUCCESS OF MEDICAL MISSIONARY WORK IN ADVANCING CHRIST'S KINGDOM IN ARABIA.

BAHREIN, ARABIA,
March, 1911.

Medical Work of the Arabian Mission.

RETROSPECT AND PROSPECT.

THE NEED AND THE OPPORTUNITY.

"Fever is written in three parts in ancient wisdom—in the first there is the straitening of hell, in the second the oppression of fire, and in the third, the torture of hell-fire; it steams like a boiling pot each time it seizes upon you. As for the third,—may God protect us from it!—in the name of God it comes, in the name of God it vanishes, in the name of God it passes by, in the name of God it departs, in the name of God it turns aside, in the name of God the Most Merciful. We are causing to descend upon the true believers the secret of it for the good of man—and let him, upon whose heart it hath descended to heal by this book, see to it that he heal by the permission of God the Most High."

So begins the section on fever in one of the Arabic books of medicine found in the household, at once confessing complete ignorance of the nature of the causes of fever, and acknowledging utter inability to cope with it. The ancient literature of Arabia contains some interesting and very able treatises on medicine and its related sciences, showing that up to a certain era the wise men of Arabia were keeping abreast of medical science in Greece and the rest of the civilized world. But there it stops, and not only did all advance cease, but the lore already acquired was inaccessible to the great mass of the people, or was but imperfectly handed down from one generation to the next by ignorant and unread men, and more ignorant women. And thus the science so beneficial to mankind, which took root and flourished for a time in the desert soil of Arabia, died for lack of husbanding and propagation.

We read with interest in the early annals of the Arabian Mission how the treatment and care of the sick and suffering was forced upon Mr. Zwemer, and how adept he became in allaying the ordinary ailments of the people among whom he worked. An extract from a Bahrein station report of 1894 pictures the situation: "Much as my small acquaintance



DR. THOMS OPERATING UNDER DIFFICULTIES.

with drugs has been of help in disarming prejudice and making friends, I daily find how little I do know and how much I ought to know of medicine. The most interesting cases I must turn away because I am not a surgeon and because the responsibility and anxiety of treating those who are dangerously ill is too great for a nonprofessional. The need of a medical missionary here is second only to Busrah. In the whole island with some 50,000 people there is no doctor, and native quackery is cruel in the extreme. In a place where dentistry is practiced by the use of wedges, hammers and tongs, and where they fill a hollow tooth with melted lead to ease pain, I have won a score of friends by less painful methods." Truly a man can do much in Arabia who can "cure fever and pull teeth without pain."

DEVELOPMENT OF THE WORK.

Friends of the Mission will recall the repeated disappointments and discouragements attending the first efforts at establishing permanent medical work. But the importance of it as a means of opening the way for the Gospel was paramount, and the need of the people imperative, and strong faith held out against all discouragements. And the year 1896 saw Dr. Worrall carrying on a successful medical work at Busrah, treating between five and six thousand patients that year, besides making a tour of inspection of the other two stations, Bahrein and Muscat. The same year Mrs. Zwemer began medical work for the women, thus opening up a new field of helpfulness and a new door of opportunity for the spread of the Gospel message.

The history of the medical work from this time on has been one of extension and growth, of gradual increase in the force of workers, and of occupation of new fields. In 1900 work was definitely opened at Bahrein, and in October, 1902, the new Mason Memorial Hospital was taken into use, and formally dedicated at the Mission Meeting in January, 1903. In Busrah, meanwhile, a large work continued to be carried on, but with no accommodations for in-patients, surgical and medical, beyond those furnished by a commodious native house. The spring of 1910, however, saw the laying of the cornerstone of the Lansing Memorial Hospital, and the building went rapidly on to completion the same year. The previous year, 1909, a doctor was established at Matrah, near Muscat, with the hope of buying land and erecting a hospital in the near future. Early in 1910, also, Kuwait, important as the key to the interior of the Nejd, was reopened by medical work from Busrah, and later in the year land was obtained on which to erect a hospital and other mission buildings.

THE WORK AT BAHREIN.

The Mason Memorial Hospital is pleasantly situated, fronting on a garden which boasts, besides the datepalm and the ethyltree, several broad-leaved shade trees, a considerable vegetable garden, and even a bed of nasturtiums and sweet peas. It is a joy to look upon, and a rest to weary eyes. The hospital itself is a two-story building, shaded all around by deep verandahs. Downstairs the main rooms are the doctor's office, waiting and



AT THE GATE, MASON MEMORIAL HOSPITAL, FAKHREIN.



OPERATING ROOM, DR. MYLREA AT WORK.

treatment rooms for men at the left of the front entrance, with similar rooms for the women at the right. Accessible from both is a special examination and treatment room, and conveniently situated for both is the common dispensary and drug room. Upstairs are found the operating and preparation rooms adjoining the large men's ward of ten beds on one side, and the women's ward of five beds on the other. Besides these two wards there is a smaller ward for men containing three beds, and one single room. In 1910 a two-roomed isolation ward was erected on a new plot adjoining the hospital compound at the back, with money given for the purpose by M. Victor Rosenthal, a pearl merchant from Paris.

The staff for the present year consists of the physician in charge, Dr. Mylrea; Mrs. Zwemer in charge of women's work and the upstairs wards; a dispenser, a dresser, an orderly, and a man for general work, not to mention the various other functionaries who are quite necessary in running a hospital in the East. The morning dispensary clinics are held five times a week, leaving Sunday free, and Wednesday for operations. The attendance varies considerably from day to day, depending on the weather and the seasons. The competition of the Government Hospital, with a Mohammedan doctor in charge, and attendance at religious services not required, apparently does not affect the total attendance, although without it the number would probably have shown a marked increase. I quote from Dr. Mylrea's report for 1910: "The total number of new cases treated in the dispensary on the men's side was 2,708, and on the women's side 843; the total number of treatments new and old was 8,400 on the men's side, and 2,659 on the women's side, making a grand total of 11,059. Upstairs in the wards 101 patients spent 1,977 days under our care; of these 101, four were women. The cases included forty surgical, nineteen eye, and thirty-seven medical on the men's side, and on the women's side three surgical, one eye, and one medical." During the year two hundred and thirty-three addresses were given on the men's side, and one hundred and fifty-six on the women's, and daily ward talks to inpatients. Besides these regular channels for preaching the Word, there is the personal witness, the daily contact with patients, the daily conversation in the hospital and in the homes, which cannot be set down in a report, but which will surely bear fruit.

1 The Mason Memorial Hospital has stood now for eight years and more



MEN'S WARD, MASON MEMORIAL HOSPITAL, BAHREIN.

with wide open doors to welcome the sick and suffering who have come from near and far, and its fame has gone abroad. Go into the wards any day, and you will find patients not only from the islands of Bahrein, but from the Hassa and Oman coasts, and from the far interior of the Nejd; you will find the Persian from across the Gulf, and the man who talks only Hindustani or Turkish. And to the officers and men of the steamships that ply the Gulf, Bahrein has become a haven in time of serious illness, situated as it is halfway up the Gulf. Last year one venerable, patriarchal old man, speaking the purest of Arabic, came all the weary way across the interior from near Mecca, led by the hand, for he had a cataract in both eyes. How he had heard that across on the island of Bahrein he could regain his sight, we do not know; but he came in faith and hope and went away rejoicing in restored sight, filled with praise to God and gratitude to the doctor who had accomplished the wonder.

Again and again, when men from the interior have come to seek medical aid, the invitation has been extended to the doctor: "Come back with us and heal our sick." And to the question, "Should I be welcome? Should I be safe?" the answer invariably comes, "Yes, many times welcome; we would be indebted and grateful, deeply grateful." And that call is very attractive and some day soon it will be responded to, and the interior of Arabia will open out to the Gospel. But even if the time were ripe to go now, what could the doctor do? He is single-handed, and if he leaves his work during the time seasonable for desert travel, which is also the time when the hospital is busiest, he will be disappointing those who have come for help, and a large opportunity will be lost. It is borne in upon the minds of all, each year more urgently, that every well-established hospital needs at least two fully-equipped physicians. Then when one of them is away on extended tours, or on necessary vacation, or even on an urgent outcall to a distant village, the work need not be at a standstill; and there is always enough, and often more than enough for two.



THE WORK IN BUSRAH.

Busrah being a city of size as compared with the towns of Bahrein Island, and being under Turkish rule, the work there naturally presents certain differences and certain initial difficulties, such as requiring a Turkish diploma of the doctor, and, under present ruling, of the hospital dispenser. The field is larger and the people wealthier, hence the receipts are much higher, making the work self-supporting. But at the same time it is true that there is greater competition, there being no less than five or six



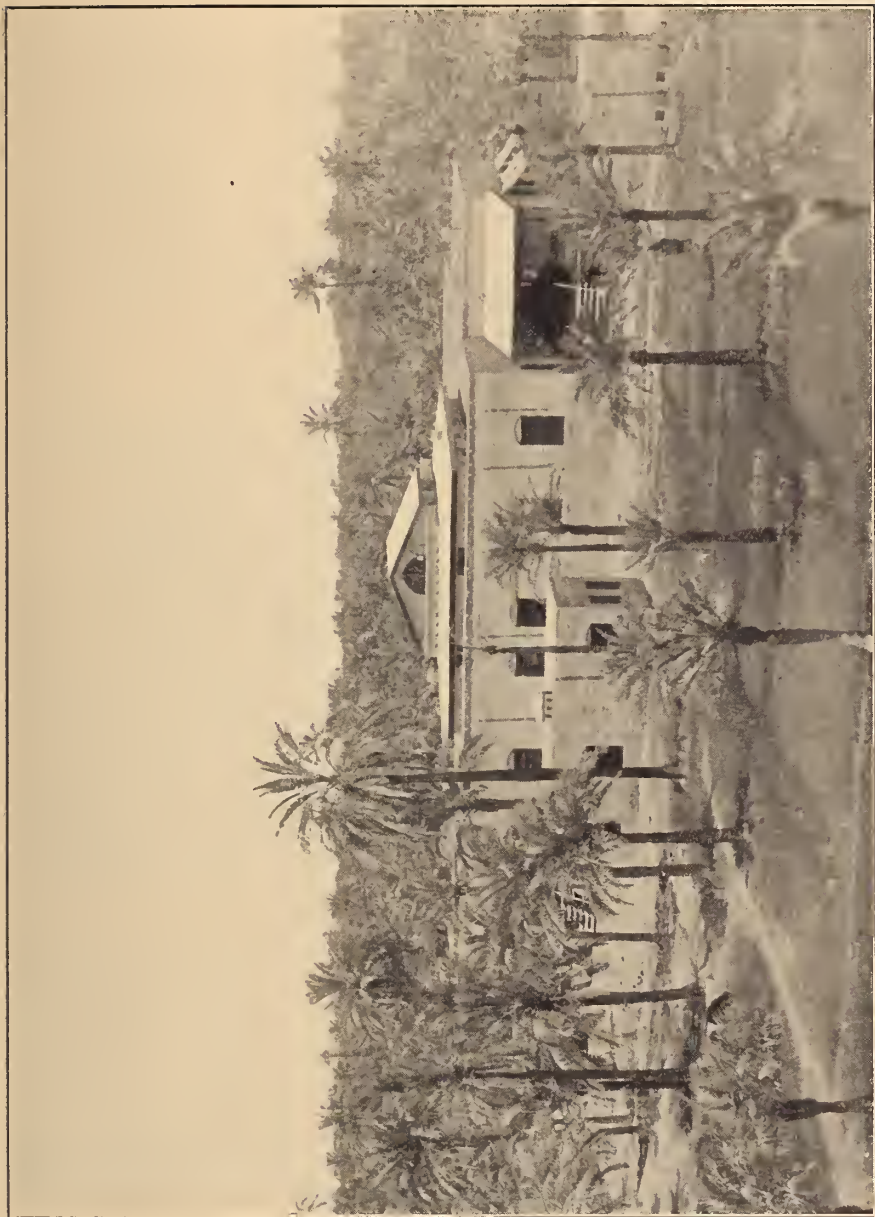
MORNING CLINIC—BUSRAH.

other physicians, carrying on work either independently or under government control. This necessitates maintaining a high standard of work, in order that the people may go to the Mission doctor and come under missionary influence.

The medical work at Busrah has been carried on with marked success in spite of the fact that it has had no adequate accommodations until now. This is shown not only by the statistics of patients treated and operated on



THE LAYING OF THE CORNERSTONE, LANSING MEMORIAL HOSPITAL, BUSRAH.



THE LANSING MEMORIAL HOSPITAL, BUSRAIH.

year by year, during the fifteen years of work, but by the fact that the intense prejudice which hedged in the work in its beginnings has been gradually broken down, so that the laying of the cornerstone of the Lansing Memorial Hospital in the spring of 1910 took on the aspect of a city function, with many officials present and a speech by the Wali (Governor) himself. Those concerned will remember the great difficulties attending the buying of land, how for years it was entirely impossible. And when finally land was obtained, to get permission to build the hospital involved endless red tape, even necessitating a trip to Constantinople by the doctor in charge. But the irade was finally gained, and at the public ceremony the men of prominence, all Moslems nominally, did not hesitate to acknowledge the good works of the Christian missionaries in their city.

The medical reports for 1910 show that jointly Dr. and Mrs. Worrall treated 13,217 patients, of whom 7,068 were men, 5,845 women. There were 133 inpatients in the hospital, fifty of whom were women, and of these latter, twenty were operative cases. Of the 7,068 cases among men 4,070 were medical, 1,093 surgical, and 1,903 eye cases; by another classification 4,715 were Moslems, 1,074 Christians, 1,279 Jews. Of the 5,845 women a somewhat higher per cent. were Moslems. The surgical cases varied from trivial minor operations to the most serious major operation. Among the women were numerous obstetrical and gynecological cases, the former always serious, as the doctor is rarely called in normal cases. It will be noticed that the woman's work is much more extensive with a woman physician in charge. According to the reports most of the cases come from Busrah and vicinity, with a goodly number from Mohammerah, Abd-el-Kaseeb and Yahoodie, and many places up the river. The outcalls to Busrah city and Ashar reached upwards of three hundred for men, while Mrs. Worrall made a hundred and seventy-five calls on women patients.

With such signal success working under difficulties and with inadequate accommodations and equipment, we may hope for increased efficiency with a well-equipped building such as the Lansing Memorial Hospital will be, and with increase of the working force. If one doctor is insufficient for Bahrein, much more is this true for Busrah. The women physician has enough with her work among the women, and can be of help to the man in charge with operations and incases only. There is large opportunity for medical touring not only along the Shatt-el-Arab, but inland also, for

which obviously an extra man is needed. And this need will be met eventually, is even now being met by medical men from the University of Michigan, who will work at the same time as medical missionaries under the Board of the Arabian Mission, and as missionary representatives of their University.

WORK IN THE MUSCAT FIELD.

Medical work for women has been carried on with some interruptions at Muscat, in a small room downstairs in the Mission House; the present hope is, with money already donated, to build a modest dispensary, in which



DR. BENNETT AS TRAVELING PHYSICIAN IN OMAN.

a woman physician can do a much-needed work. In 1909 Dr. Thoms was assigned by the Mission to open medical work at Matrah, a town situated just behind Muscat on a small inlet. This place was chosen in preference to Muscat itself, partly because of the British hospital already established in the latter place, but more especially because Matrah is in some respects a better location for permanent medical missionary work, being as the name itself indicates, the depot for all caravans of Arabs coming from the interior. There was some secret opposition to the work at first, but this gradually died



DR. THOMS TREATING PATIENTS AT MATRAH.

down, the work grew rapidly, and the doctor had to make use of part of his house as a hospital, operative eyecases, such as cataract, being especially numerous. The work suffered some interruptions, and is as yet only in its beginnings, but is rich in promise. The whole hinterland of Oman is waiting to be opened and to receive the Gospel.

THE WORK AT KUWEIT.

This city of strategic importance in the conquest of Arabia for Christ was at one time open to missionaries, but through unforeseen circumstances it became for a number of years effectually closed against them. In 1909, however, a request was sent to Busrah from the Sheikh at Kuwait for the Mission doctor to make them an extended visit. Accordingly at the following Annual Meeting, Dr. Bennett was detailed to comply with this request of the Sheikh, and to try to reopen the place. During the first visit an understanding was reached, and later in the spring some weeks were spent treating patients in a house assigned for the purpose by the Sheikh. During a still later trip, this house was secured on extended lease, and a

dispenser with a colporteur left in charge after the departure of the doctor. A definite sum of money for buying land at Kuwait was already at hand, so the Mission determined to follow up the advantage gained. Dr. Bennett was again sent there to try to consummate a proposition previously made, but rejected by the Sheikh. After considerable difficulty land was obtained in a good location, sufficient for the erection of a hospital and a mission house, and a permanent foothold was thus gained. At present only the



CLINIC AT KUWEIT.

medical work is welcome; the people consent to listen to the reading of the Word simply that they may receive treatment. They are very fanatical, and there is a great deal of prejudice to be overcome. For the present year the station is kept open by interrupted residence of the missionary in charge, and medical service by the mission doctors in turn for a certain definite time. The re-opening of the door of opportunity came as a gift of God in answer to prayer. And surely He who opened the door will also provide the way for entering in and possessing fully.

SUMMARY.

At present, then, medical work is carried on from four centers—Bahrein, Busrah, Muscat and Kuwait. Bahrein has a hospital of twenty beds, with an additional eight in the isolation ward. The new hospital at Busrah, not yet equipped, has a capacity of about twenty-four beds. At Muscat a woman's dispensary is to be built; at Matrah, substation to Muscat, land must be purchased and a hospital erected, for which the funds are already in hand. At Kuwait, land has recently been obtained, and is ready for the erection of buildings.

By referring to the list of Arabian missionaries it will be seen that it includes ten physicians, and six men and four women. Thank God for so large a number. With the short term of service practicable in Arabia, one-fifth or one-sixth of the force must always be deducted as being off the field. For full occupation of work now possible, there are needed two men at least in Busrah, two at Bahrein, two for the Kuwait work, and one, if not two for Matrah. This means an additional two at once. To develop the women's work, a woman physician is needed at each station. Commendation is due the splendid work of the women of the mission, who, with a complete or partial nurse's training, with or without the direction of a doctor, have done medical work for women. Their work can still be counted on, but with the development of hospitals it will naturally be directed more toward the care and superintendence of inpatients, assistance in the operating room, and the training of native nurses.

Prayer and thought, money and lives have been invested in this enterprise. God gave it increase, and with growth and expansion has come added need for prayer and thought, for men and money. Will any one doubt that it will be a paying investment?

